Work Pass Division 18 Havelock Road Singapore 059764 Tel: 6438 5122 www.mom.gov.sg mom...wpd@mcm.gov.sg



Annex A Employer and Spouse Income Tax Declaration

This form may take you 1 m	inule to fill in.			
Please complete this for applying for a Work Perm	m only if you do not wish nit (WP) for a foreign domes	to submit your Income Titic worker.	ax Notice of Assessment when	
Part I - Monthly Combine	d Income of Employer and	Spouse		
Please tick (✓) the appro	priate box.			
☐ Below \$2,000	☐ \$2,000 to \$2,499	☐ \$2,500 to \$2,999	☐ \$3,000 to \$3,499	
☐ \$3,500 to \$3,999	□ \$4,000 to \$4,999	□ \$5,000 to \$5,999	□ \$6,000 to \$7,999	
□ \$8,000 to \$9,999	□ \$10,000 to \$12,499	☐ \$12,500 to \$14,999	☐ \$15,000 to \$19,999	
☐ \$20,000 to \$24,999	2 \$25,000 and above		, , , , ,	
Part II – Authorisation by	Employer and His/Her Spor	use		
complete Part II and autho	spouse do not wish to subm rise the Cornptroller of Incon f the verification to the Control	ne Tax to verify your income	ax Notice of Assessment, please range stated in Part I above and	
l,(Name of	. (Name of employer) , *NRIC/WP No/FIN:			
assessment record(s) for t	ne current Year of Assessmer so authorise the Comptroller	nt and the two previous Years	in Part I above, based on *my/our s of Assessment, for the Controller or communicate the results of the	
the point of verification, I*/	we understand that the Comp	current Year of Assessment stroller of Income Tax will ver previous Years of Assessmen	*is/are not available or finalised at ify *my/our income range stated in nt.	
Employer		Empl	Employer's Spouse	
Income Tax Notice of Assessment No:		Income Tax Notice of A	Income Tax Notice of Assessment No:	
TS .		J.J.		
Signature:		Signature:	en andrewe and the state of the second and the seco	
The state of the s				
Date:		Date:		
*Delete where inapplicable			Mine of Proposition of the Company and the State of the S	